

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000418375

Entity Name: OUTER EDGE ADVENTURES LLC

Current Principal Place of Business:

914 SE ALBATROSS AVE
PORT SAINT LUCIE , FL 34983

Current Mailing Address:

914 SE ALBATROSS AVE
PORT SAINT LUCIE , FL 34983 US

FEI Number: 88-4140270

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STANLEY, HARLEY B
914 SE ALBATROSS AVE
PORT SAINT LUCIE , FL 34983 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name STANLEY, HARLEY B
Address 914 SE ALBATROSS AVE
City-State-Zip: PORT SAINT LUCIE FL 34983

Title MRG
Name STANLEY , ROBIN
Address 1905 SW 17TH STREET
City-State-Zip: BOYNTON BEACH FL 33426

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HARLEY STANLEY

MRG

02/10/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date